




	Class	Section
ISSUE CLASSIFICATION		

PATIENT NUMBER _____

U.S. UTILITY Patent Application

O.I.P.E.

PATENT DATE


O.I.P.E.
 SCANNED  Q.A. 

APPLICATION NO. 09/788131	CONT/PRIOR D	CLASS 424	SUBCLASS 43	ART UNIT 1614	EXAMINER 352 KIM-DEGLOUX
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APPLICANTS

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1644

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Oral, nasal and pulmonary dosage formulations of copolymer 1

PTO-2040
12/89

ISSUING CLASSIFICATION

TERMINAL DISCLAIMER	DRAWINGS			CLAIMS ALLOWED	
	Sheets Drawn	Figs. Drawn	Print Fig.	Total Claims	Print Claim for O.G.
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) (Date)			NOTICE OF ALLOWANCE MAILED	
<input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent No. _____ _____ _____	_____ (Primary Examiner) (Date)			ISSUE FEE	
				Amount Due	Date Paid
<input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.	_____ (Legal Instruments Examiner) (Date)			ISSUE BATCH NUMBER	

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